CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates
For Single-Candidate Committees

1. DATE OF REPORT	2.a. NAME OF C	ANDIDATE OR COM		
10.52-5050	· — ·		MILLEE	
2.b. IF COMMITTEE, NAME OF CANDIDATE	1 - Jim A	VATERS		
The second secon			3. ELECTIO	
4.a. CAMPAIGN ADDRESS AND PHONE	<u> </u>		1(-3	3-2020
Street or Rural Route	City, \			
I _		Sta		Phone
4.b. CANDIDATE'S HOME ADDRESS (if differen	- HENOR	ASOU! 11	=, TN. 37073	5 615-945-0414
Street or Rural Route	t than 4.a.) City	~ .		
	City	Sta	ite Zip Code	Phone
5. OFFICE SOUGHT (include district number if				
The second of th	applicable)		OLITICAL TREASURER (may be candidate)
ALDERMAN WARD	6	1 7 m	MATERS	
7. CATEGORY OR REPORT (Check one)	F=-1			
FIRST SECOND THIRD	LJ FOURTH	PRE-		
QUARTER QUARTER QUARTER	QUARTER	PRIMARY GI	PRE- MID-YE ENERAL SUPPLEM	
8.a. BEGINNING DATE OF REPORTING PERIOD	-	8.b. ENDING DATE	OF REPORTING PERIOD	CITIAL SUFFLEWENTAL
UU 1, 2020		OO 2	4, 2020	
9. (Check one)			77 0-20	
a. This campaign is exempt from detailed	d diadaa L			
a. This campaign is exempt from detailed tures total \$1,000 or less for this repo	u disclosure pecaus rting period. (Comr	e contributions (inclu lete items 12d - 12e	iding in-kind) received tota	al \$1,000 or less AND expendi-
	- · · ·	120., 120.	and (2).)	
 b. This campaign is required to file a det and/or expenditures total more than \$ 	ailed financial disclo	sure because contril	outions (including in-kind)	received total more than \$1,000
The state of the s	r,coo for this report	ing period.		
10. I/we do solemnly swear or affirm that the int				
accurate accounting of campaign contribution	formation contained hs and expenditures	in this campaign fin	ancial disclosure report is	s true and that this report is an
				imittee by the Campaign
benefit of the candidate or for any other none	political purpose as	defined by the federa	al internal revenue code.	od for the personal linandal
1 m W out	10 22 5	$\mathcal{M}_{\mathcal{A}}$	12.4	
	10-513-50	> Xm	Wallis	19-23-20
signature of candidate	date	si	gnature of political treasu	rer date
<u> </u>				
11. WITNESS SIGNATURE			-	
21/4				4
- Unginia Walds		XUn	ainie 7,)	1 tors
signature of witness	date		signature of witness	date
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT	-11 E	a	765 8	ີ ເ
a. BALANCE ON HAND LAST REPORT	FILE	PM	<u> </u>	
b. TOTAL RECEIPTS THIS PERIOD	AM		•	İ
TO THE ENGLANCE OF THE PROPERTY OF THE PROPERT	OCT % f	2020	·····.\$ <u></u>	
c. TOTAL DISBURSEMENTS THIS PERIOD	UCI = V	, =	,2,655.0	28
		COUNTY	\$ = y = -	
d. BALANCE ON HAND (12.a. plus 12.b. min	us 12 CTION C	DMMISSION		·2289.26
· · · · · · · · · · · · · · · · · · ·	FLE			
e. TOTAL LOANS OUTSTANDING				8
				\$
f. TOTAL OBLIGATIONS OF ITSTANDING				8
f. TOTAL OBLIGATIONS OUTSTANDING		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\$
				į



SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full)	44 DEPORT COV	EDIMO TUE DEDIGE
13. NAME OF CAMBIDATE OR COMMITTEE (IN FUII)	FROM (0 - 7)	TO: 0-74-7
RECEIPTS 15. CONTRIBUTIONS (other than loans and interest)	~	1- 51- 6
a. Unitemized Contributions (\$100 or less from each source this period)	\$	
b. Itemized Contributions (over \$100 from each source this period)		RAAA
c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.)		\$
16. LOANS RECEIVED THIS REPORTING PERIOD		
17. INTEREST RECEIVED THIS REPORTING PERIOD	***************************************	\$
18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.)		\$
DISBURSEMENTS	<u> </u>	
19. EXPENDITURES (other than loan payments)		
a. Expenditures (\$100 or less each payee this period) (must be listed by category - e. IRHIND MART \$20.01 MOGER \$20.01 DIRECT Edge (Ampaigns LLC \$2.537. A SAP PRINTING \$63.37 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	<u> </u>	gasoline)
Total of Expenditures (\$100 or less each payee)	· ** *** *****************************	03,38
b. Itemized Expenditures (Over \$100 each payee this period)	,	_
c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.)		
20. LOAN REPAYMENTS MADE THIS PERIOD		
21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.)		80.122°
22.IN-KIND CONTRIBUTIONS		
Unitemized in-kind contributions (\$100 or less from each source this period)		
b. Itemized in-kind contributions (over \$100 from each source this period)	. \$	- 1
c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)	1	.\$
23. OBLIGATIONS		
a. Unitemized Obligations Outstanding (\$100 or less each)	. \$	- 2
b. Itemized Obligations Outstanding (Over \$100 each)	\$	- 1
c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item	12.f.)	.\$ \



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITT	EE		2 REPORT O	OVERING THE PERIOD
			FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN CONTRIBL	JTIONS FR	OM PRECEDING P	AGE (enter \$0 if first itemized page)	Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR	EACH ITEM	IZED CONTRIBUTION	(contributions totaling more than \$100 from any c	ontributor)
First Name				Amount of Contribution
Last Name/Organization Name			Primary Election General Elect	tion
Address			Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Aggrégate This Election
Occupation		<u> </u>		
Employer			_	
First Name	Middle Na	me	Contribution Received For:	Amount of Contribution
Last Name/Organization Name	l		Primary Election General Elect	ion \\\\
Address			Runoff (Local Elections Only)	
City	State	Zip Code	Date of Contribution	Aggregate This Election
Occupation				
Employer				
EL .W				<u> </u>
First Name	Middle Nan	ne	Contribution Received For:	Amount of Contribution
First Name Last Name/Organization Name	Middle Nam	ne	Contribution Received For: Primary Election General Elect	
	Middle Nam	ne		
Last Name/Organization Name	Middle Nam	Zip Code	Primary Election General Elect	
Last Name/Organization Name Address			☐ Primary Election ☐ General Elect☐ Runoff (Local Elections Only)	ion
Last Name/Organization Name Address City			☐ Primary Election ☐ General Elect☐ Runoff (Local Elections Only)	ion
Last Name/Organization Name Address City Occupation		Zip Code	☐ Primary Election ☐ General Elect☐ Runoff (Local Elections Only)	ion
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General Elect Runoff (Local Elections Only) Date of Contribution	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer	State	Zip Code	Primary Election General Elect Runoff (Local Elections Only) Date of Contribution Contribution Received For.	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State	Zip Code	Primary Election General Elect Runoff (Local Elections Only) Date of Contribution Contribution Received For:	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name	State Middle Nam	Zip Code	Primary Election General Elect Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City	State Middle Nam	Zip Code	Primary Election General Elect Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution
Last Name/Organization Name Address City Occupation Employer First Name Last Name/Organization Name Address City Occupation	State Middle Nam State	Zip Code Zip Code	Primary Election General Elect Runoff (Local Elections Only) Date of Contribution Contribution Received For: Primary Election General Election Runoff (Local Elections Only)	Aggregate This Election Amount of Contribution

ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE	OR COMMITTEE	······································	2 REPORT COVE	RING THE PERIOD	
			FROM:	TO:	
3. TOTAL ITEMIZED IN-KIND	CONTRIBUTIONS F	ROM PRECEDING F	PAGE (enter \$0 if first itemized page)	Amount	
4. COMPLETE THE APPROPRIA	ATE ITEMS FOR EACH I	TEMIZED IN-KIND CON	NTRIBUTION (in-kind contributions totaling more than \$100 from any	contributor during the period)	
First Name		e Name	In-Kind Contribution Received For: Primary Election General Election	Value of Kind Contribution	
Last Name/Organization Name	,	· · · · · · · · · · · · · · · · · · ·	Runoff (Local Elections Only)		
Address			Date of In-Kind Contribution	Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer				
First Name	(lidd)	e Name	In-Kind Contribution Received For:	Value of In-Kind Contribution	
Last Name/Organization Name	<u></u> <u>-</u>	·	Primary Election General Election		
Address	• ,,		Runoff (Local Elections Only) Date of In-Kind Contribution	Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution	12. 4	
Occupation	Employer	L			
First Name	Aiddle	Name	In-Kind Contribution Received For:	Value on n-Kind Contribution	
Last Name/Organization Name	<u>_</u> <u> </u>		Primary Election General Election		
Address	· <u> </u>		Runoff (Local Elections Only) Date of In-Kind Contribution	Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution		
Occupation	Employer	I			
rst Name Middle Name		In-Kind Contribution Received For:	Value of In-Kind Contribution		
Last Name/Organization Name			☐ Primary Election ☐ General Election ☐ Runoff (Local Elections Only)	M	
Address		·	Date of In-Kind Contribution	Aggregate this Election	
City	State	Zip Code	Description of In-Kind Contribution	1 -\	
Occupation	Employer			_	
irst Name	Middle	Name	In-Kind Contribution Received For:	Value of In-Kind Contribution	
ast Name/Organization Name			Primary Election General Election		
ddress		· · · · · · · · · · · · · · · · · · ·	Runoff (Local Elections Only) Date of In-Kind Contribution	Aggregate this Election	
ity	State	Zip Code	Description of in-Kind Contribution		
ccupalion	Employer			\mathcal{M}	
 TOTAL ITEMIZED IN-KIND ((Carry forward to item 3, of next page 	if additional pages of this for	m are used.)			
(If this is the last page of in-kind contr SS-1128 (Rev. 2/06)	ibutions, this amount must be	shown in item 22b, of sum			
<i>y</i>			Page of	RDA 1159	

ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE	5			2. REPORT COVE	170 1
3. TOTAL ITEMIZED CAMPAIGN EXPENDI	Amount 24-75				
4. COMPLETE THE APPROPRIATE ITEMS FOR	riod) 7				
First Name	Middle N		Purpose of Expenditure		Amount of Expenditure
Lest Name/Business Name DOF WM Address 2000 BLEN ECHL	YOME TZh		Crampaign	MAIL-	
"Nostville	\$	37215			\$2557.71
First Name ASAP PUTIM'S Last Name Funimes	Middle N	ame	Purpose of Expenditure Q Camp of Q ELY ERS	ń	Amount of Expenditure
Address 16 DM PLACIN BL	D,		FUEL		
thenoensonu; 110	State	37025			#6337
First Name 1969EN	Middle Na	ame	Purpose of Expenditure		Amount of Expenditure
Last Name Australia Name Address HTND W Son VI 116			For an		
City City City City	State	Zip Code 37075	FOR		\$20.00
First Name	Middle Nar	пе	Purpose of Expenditure		Amount of Expenditure
Last Name Business Name O MAR	7		CAFE ON	MOMON	
Address 234 and Slotter	le?	Is. Rd.	NO PL W	Whi	
"HADDER SONU, 112	State	37075	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		#20.01
First Name	Middle Nan	ne	Purpose of Expenditure		Amount of Expenditure
Last Name/Business Name					
Address					
City	State	Zip Code			
First Name	Middle Nam	e	Purpose of Expenditure		Amount of Expenditure
ast Name/Business Name					
Address					
ity	State	Zip Code			
 TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages (If this is the last page of expenditures, this amount must 	of this form ar be shown in i	re used.) tem 19b. of summary.)		\$	2655.09
CS 4420 (Barry 4/02)			·		

ITEMIZED STATEMENT OF LOANS - CANDIDATE

NAME OF CANDIDA	ATE OR COMMITTE	E	- <u>-</u>	··				2. REPORT		NG THE PERIOD
3. COMPLETE THE AF	PROPRIATE ITEMS	EOD EAC	JITE (A)	7ED LOAN						10.
			THEW!	ZED LOAN	(loans totaling n	nore than \$10	O from any sou	rce during the	period)	
Complete the Following fo	Middle N			Outstanding	Loan Balance	Loans				
Tean in the second					g of Period)	Receive		Loan Payments	Ovdsta	nding Loan Balance End of Period)
Last Name/Organization Name	•]						
Address				Loan Recei	ved For:	 .		Date of Lo)30	
City	State	7-0-1-		☐ Prima	ry Election	General	Election		Ju ii	
	J.J.	Zip Code		☐ Runof	f (Local Elections (Only)				
	List All Endo	orsers or Gua	rantors fo	or Above Lo	an (If more spa	ce is needed	please atta	h a page)		
First Name		Middle Nar			First Name			- P-3v/	Mjetile Na	ame
Last Name/Organization Name					Last Name/Org	anization Nam	16		$\perp (\setminus$	· .
Address	······			·····		a neonon man			\ \	,
nuuress					Address				_	1)
City		State	Zip Co	ode	City				State	Zip Code
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding					
First Name		Middle Narr	10		First N.					
		I IMIGUIC INDI	ic		First Name				Middle Nar	me
Last Name/Organization Name					Last Name/Orga	inization Nam	e	·· ···	T	
Address					Address	······································			- 	
City	<u> </u>	State	Zip Cod	de .	City				State	77.0-4
Amount Guaranteed Outstanding		ļ			Amount Guarante	and Outstand			State	Zin Code
					y anount Guarann		ng 			
First Name		Middle Name	9		First Name			-	Middle Nar	me
Last Name/Organization Name					Last Name/Orga	nization Name			1	
Address					411				$\frac{1}{2}$	
					Address				1	
City		State	Zip Code	е	City	- · .			State	Z/p Code
Amount Guaranteed Outstanding			<u> </u>		Amount Guarante	ed Outstandin	g	<u> </u>	<u> </u>	
irst Name		Middle Name			First Name					
not blome (Ore - in all 1)		THIOUG THAINE		_	rirst name			:	Middle Nam	е
ast Name/Organization Name					ast Name/Organ	ization Name			1/	
Address					Address				1	\
City		State	Zip Code		Pih.					1
nount Guaranteed Outstanding					City State Zin Code				\Zip/Code	
					mount Guarantee	o Outstanding	Ī		M	
Totals for all Loans (comp (Total loans received should also (Total loan payments should also Total outstanding loan balance sh	be shown in item 16, on sui be shown in item 20, on sui	mmary page.)		C	Outstanding Loan I (Beginning of Pe	Balance eriod)	Loans Received	Loan Paymen	Ou t	tanding Loan Balance (End of Period)
SS-1132 (Rev. 4/0		z.e. on front pa	age.)		· · · · · · · · · · · · · · · · · · ·		6	4		ν
50 5	,					Page	<u> </u>			RDA 1159

ITEMIZED STATEMENT OF OBLIGATIONS - CANDIDATE

3. COMPLETE THE APPROPRIATE ITE OBLIGATION (obligations totaling more person/vendor at the end of the report First Name Last Name/Business Name Address City Description of Obligation First Name Last Name/Business Name	re than \$100 o	wed to any lame Zip Code	Outstanding Balance (Beginning of Period)	2. REPORT CO FROM: Debt Incurred This Period	Payments This Period	Outstanding Balanc (End of Period)
OBLIGATION (obligations totaling morperson/vendor at the end of the report First Name Last Name/Business Name Address City Description of Obligation First Name	re than \$100 o ting period) Middle N	wed to any lame Zip Code			This Period	(End of Period)
Last Name/Business Name Address City Description of Obligation First Name	State	Zip Code				
Address City Description of Obligation First Name						
City Description of Obligation First Name						1
Description of Obligation First Name						
First Name						
First Name	Middle N				1	1.
	Middle N				<u> </u>	
Last Name/Rusiness Name	l l	ame			l	1
					. /	
Address		,				
City	State	Zip Code	_		l	
Description of Obligation						\\
						·
First Name	Middle Na	ime				
Last Name/Business Name			-		()	
Address			-		3	
City	State	Zip Code	-			
Description of Obligation	0.00	Zp code				
						_
First Name	Middle Nar	ne				
ast Name/Business Name			-			
ddress			-		,	1)
Dity	State	Zip Code				
Description of Obligation	Otale	Zp Code				7
escription of Obligation					<u> </u>	
Irst Name	Middle Nam	ne				
ast Name/Business Name			-			
idress			1			// /
ity	CI-I				1	$\mathcal{Y} \mid$
	State	Zip Code				j
escription of Obligation						
TOTALS					- A	
Total from Outstanding Balance - (End of Period in item 23b. on summary page.)	d) column must a	also be shown			//	
SS-1127 (Rev. 4/02)		<u> </u>		Page of	7	RDA 1159